

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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2003 JUL -1 PM 1:14

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001		2 Total pages this report: 1/13	
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Christopher 'Chip' NICKNAME LAST SUFFIX Haass				OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 171121 <input type="checkbox"/> Change of Address SAN ANTONIO TX 78217				
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Veronica NICKNAME LAST SUFFIX Garcia				
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 439 Cloverleaf SAN ANTONIO TX 78209				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	AREA CODE PHONE NUMBER EXTENSION () -				
7 CAMPAIGN TREASURER PHONE	8 REPORT TYPE <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04/01/2003 06/30/2003				
10 ELECTION	ELECTION DATE Month Day Year 05/03/2003		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Other -- San Antonio City Cou - ncil 10		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...				
	Name				
	Address/PO Box; Apt. / Suite #; City; State; Zip Code				
<input type="checkbox"/> additional pages					
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS2003 JUL -1 PM 1:14 FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 NO REPORTABLE
ACTIVITY☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)18 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 270.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 4370.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

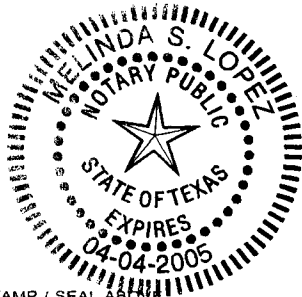
4. TOTAL POLITICAL EXPENDITURES

\$ 9300.22

OUTSTANDING
LOAN TOTALS5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Christopher K. Haass, this the 1st day of July, 2003, to certify which, witness my hand and seal of office.

Melinda S. Lopez
Signature of officer administering oath

Melinda S. Lopez
Printed name of officer administering oath

Notary
Title of officer administering oath

RECEIVED
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CITY CLERK

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1

(FOR FORMS C/OH & SPAC)

2003 JUL -1 PM 1:14

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 3/13	
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/24/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Margret Ayres 6 Contributor address; City; State; Zip Code 2408 Keating Lane Austin TX 78703	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) unknown		10 Employer (Optional)	
Date 04/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Margret Ayres Contributor address; City; State; Zip Code 2408 Keating Lane Austin TX 78703	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 05/05/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Margret Ayres Contributor address; City; State; Zip Code 2408 Keating Lane Austin TX 78703	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 05/02/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Herschel Bernard Contributor address; City; State; Zip Code 3102 Valley View Lane San Antonio TX 78217	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 04/28/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Donald Haass Contributor address; City; State; Zip Code 803 W. Hondo Ave Devine TX 78016	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional) retired		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1

FOR FORMS C/OH & SPAC

2003 JUL -1 PM 1:15

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 4/13	
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/28/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Donald Haass 6 Contributor address; City; State; Zip Code 803 W. Hondo Ave Devine TX 78016	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) retired		10 Employer (Optional)	
Date 04/29/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Hu Contributor address; City; State; Zip Code P.O. Box 681345 San Antonio TX 78268	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 04/29/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Hu Contributor address; City; State; Zip Code P.O. Box 681345 San Antonio TX 78268	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 04/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Iron Workers PAC Contributor address; City; State; Zip Code 4318 Clark Ave San Antonio TX 78223	Amount of contribution (\$) 400.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/26/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James T. Koch Contributor address; City; State; Zip Code P.O.Box 680511 San Antonio TX 78268	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional) retired		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1

(FOR FORMS C/OH & SPAC)

2003 JUL -1 PM 1:15

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/13	
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/28/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sylvia Chapa Koch 6 Contributor address; City; State; Zip Code PO Box 680511 San Antonio TX 78268	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) retired		10 Employer (Optional)	
Date 04/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David Leibowitz Contributor address; City; State; Zip Code 111 Soledad San Antonio TX 78205	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional) attorney		Employer (Optional)	
Date 04/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David Leibowitz Contributor address; City; State; Zip Code 111 Soledad San Antonio TX 78205	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional) attorney		Employer (Optional)	
Date 04/24/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alfredo Longoria Contributor address; City; State; Zip Code 66 Brees, #54 San Antonio TX 78209	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 05/27/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stephen Suhey Contributor address; City; State; Zip Code 206 Lari Dawn San Antonio TX 78258	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 6/13	
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/28/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ronald & Helen Tietz 6 Contributor address; City; State; Zip Code 312 Joliet San Antonio TX 78209	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) unknown		10 Employer (Optional)	
Date 04/28/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ronald & Helen Tietz Contributor address; City; State; Zip Code 312 Joliet San Antonio TX 78209	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 05/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fred W. Todd Contributor address; City; State; Zip Code 402 E. Nottingham Dr San Antonio TX 78209	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	
Date 05/15/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Paul Weppner Contributor address; City; State; Zip Code 2647 Pebble Breeze San Antonio TX 78232	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional) unknown		Employer (Optional)	

LOANS2003 JUL -1 PM 1:15 **SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 7/13
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001
4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄		\$ 0.00
5 Date of loan 04/03/2003	7 Name of lender <input type="checkbox"/> out-of-state PAC(ID# _____) Christopher 'Chip' Haass	9 Loan Amount (\$) 3000.00
6 Is lender a financial Institution? N	8 Lender address; City; State; Zip Code P.O. Box 171121 SAN ANTONIO TX 78217	10 Interest rate 0.0
		11 Maturity date 01/01/2006
12 Description of Collateral <input checked="" type="checkbox"/> none		
13 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	14 Name of guarantor 15 Guarantor address; City; State; Zip Code	16 Amount Guaranteed (\$)
17 Principal Occupation		18 Employer

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POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL -1 PM 1:15

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 8/13
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 04/03/2003	5 Payee name Action Catering 6 Payee address; City; State; Zip Code 4103 Modena Drive San Antonio TX 78218	7 Amount (\$) 250.00
8 Purpose of expenditure (See instructions regarding type of information required.) food services		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/07/2003	Payee name Alamo U-stow & Go Mini Storage Payee address; City; State; Zip Code 3500 Eisenhower Rd San Antonio TX 78218	Amount (\$) 43.00
Purpose of expenditure (See instructions regarding type of information required.) storage rental		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/09/2003	Payee name Alamo U-stow & Go Mini Storage Payee address; City; State; Zip Code 3500 Eisenhower Rd San Antonio TX 78218	Amount (\$) 43.00
Purpose of expenditure (See instructions regarding type of information required.) storage rental		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/04/2003	Payee name Clear Channel Payee address; City; State; Zip Code 3714 N. Panam Expressway San Antonio TX 78219	Amount (\$) 784.00
Purpose of expenditure (See instructions regarding type of information required.) advertising		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL -1 PM 1:15

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 9/13
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 04/14/2003	5 Payee name Clear Channel 6 Payee address; City; State; Zip Code 3714 N. Panam Expressway San Antonio TX 78219	7 Amount (\$) 1100.00
8 Purpose of expenditure (See instructions regarding type of information required.) Advertising		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/11/2003	Payee name Costco Wholesale Payee address; City; State; Zip Code #693 Sonterra Park San Antonio TX 78258	Amount (\$) 103.14
Purpose of expenditure (See instructions regarding type of information required.) food volunteers		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/31/2003	Payee name Formosa Garden Payee address; City; State; Zip Code 1011 NE Loop 410 San Antonio TX 78209	Amount (\$) 23.04
Purpose of expenditure (See instructions regarding type of information required.) food volunteers		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/16/2003	Payee name Christopher 'Chip' Haass Payee address; City; State; Zip Code P.O. Box 171121 SAN ANTONIO TX 78217	Amount (\$) 2000.00
Purpose of expenditure (See instructions regarding type of information required.) repayment of loan		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 10/13
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 05/28/2003	5 Payee name Christopher 'Chip' Haass 6 Payee address; City; State; Zip Code P.O. Box 171121 SAN ANTONIO TX 78217	7 Amount (\$) 1000.00
8 Purpose of expenditure (See instructions regarding type of information required.) repayment of loan		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/19/2003	Payee name Roger Herr Payee address; City; State; Zip Code 8760 Cross Mountain Trail San Antonio TX 78255	Amount (\$) 500.00
Purpose of expenditure (See instructions regarding type of information required.) computer services		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2003	Payee name Jamie D Payee address; City; State; Zip Code 2456 Harry Wurzbach San Antonio TX 78209	Amount (\$) 9.46
Purpose of expenditure (See instructions regarding type of information required.) food volunteers		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2003	Payee name Jim's Restaurant Payee address; City; State; Zip Code 2630 NE Loop 410 SAN ANTONIO TX 78216	Amount (\$) 17.83
Purpose of expenditure (See instructions regarding type of information required.) food volunteers		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 11/13
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 05/28/2003	5 Payee name Mama's Caf�� 6 Payee address; City; State; Zip Code 2442 Nacogdoches Road San Antonio TX 78217	7 Amount (\$) 13.34
8 Purpose of expenditure (See instructions regarding type of information required.) food volunteers		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/16/2003	Payee name Oakleaf Florist Payee address; City; State; Zip Code 4185 Naco-Perrin San Antonio TX 78217	Amount (\$) 43.09
Purpose of expenditure (See instructions regarding type of information required.) flowers		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/28/2003	Payee name Phoenix Mailers, Inc Payee address; City; State; Zip Code 4310 Tejasco San Antonio TX 78218	Amount (\$) 259.99
Purpose of expenditure (See instructions regarding type of information required.) mailing services		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/14/2003	Payee name Reggiano's Payee address; City; State; Zip Code 18740 Stone Oak Parkway San Antonio TX 78258	Amount (\$) 86.12
Purpose of expenditure (See instructions regarding type of information required.) food volunteers		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL -1 PM 1:15

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 12/13
2 FILER NAME Christopher 'Chip' Haass		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 05/04/2003	5 Payee name Rosarios Cafeteria 6 Payee address; City; State; Zip Code 910 S. Alamo Street San Antonio TX 78205	7 Amount (\$) 19.04
8 Purpose of expenditure (See instructions regarding type of information required.) interview expense		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/29/2003	Payee name The GNU Group Payee address; City; State; Zip Code 14745 Babcock,suite 706 San Antonio TX 78249	Amount (\$) 1803.67
Purpose of expenditure (See instructions regarding type of information required.) printing services		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/28/2003	Payee name U.S. Postoffice Payee address; City; State; Zip Code North Broadway Station SAN ANTONIO TX 78217	Amount (\$) 34.00
Purpose of expenditure (See instructions regarding type of information required.) postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/16/2003	Payee name US Post Office Payee address; City; State; Zip Code Serna Station San Antonio TX 78218	Amount (\$) 57.50
Purpose of expenditure (See instructions regarding type of information required.) postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
13/13**2 FILER NAME**

Christopher 'Chip' Haass

3 ACCOUNT # (Ethics Commission filers)
00000001**4 Date**

04/25/2003

5 Payee name

US Post Office

7 Amount

(\$)

1110.00

6 Payee address; City; State; Zip Code

Serna Station

San Antonio TX 78218

8 Purpose of expenditure (See instructions regarding type of information required.)
postage**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held